

## New Customer Application Form

(please print clearly, use a black or blue ballpoint pen, scan and email to: biuro@slubnezakupy.pl)

Billing details:				
Company name:				
VAT/UE VAT No:				
Street:				
Postal/zip code:				
City:				
Country:				
Name of applicant:				
Tel. No:				
Email address: (please provide for invoices, online ordering)				
Order delivery details:				
Company name:				
Street:				
Postal/zip code:				
City:				
Country:				
Contact person name: (please provide for shipping contact)				
Contact Tel. No: (please provide for shipping contact)				
Email address: (please provide for shipping notifications)				
Nature of business:				
Type of business (online, stor	e, etc):			
Web page addres	ss (url):			
Number of years in bu	ısiness:			
How Did You Learn About Slu	ıbneZakupv.pl	? (check one with ")	<i>("</i> )	
Search internet	Word of Mout	Г	Previous retailer	
Tradeshow, where?	Saw product.	Г	Advertisina, where?	
Other (please explain):				
The above information is for the pur	pose of opening a	nn account and is v	varranted to be true. I hereby auth	orize the compan
Name (Please print)		Date	Owners Signature	